



The GeriJournal

Volume 1, Number 4
December 2006

A publication of GeriatRx Pharmacy



Check Your Insulins!

Once removed from the fridge, and inserted into a pen, insulin is stable for only one month. Since each cartridge contains 300 Units of insulin, a minimum of 10 units must be used each day to meet this time requisite.

When the total insulin dose is less than 10 units per day, the insulin cartridge must be discarded one month from the day it is placed in the pen. Please identify these orders in your facility. Orders for sliding scale insulins are often in this category, and accordingly, they should receive special attention.

For simplicity, we propose choosing a day of the month, perhaps the 15th, to dispose of all such insulin products. Choosing a specific day to discard your started insulins will eliminate the need to mark the starting date on the insulin pen, and will ensure that “fresh” insulin is being used at all times.

Methotrexate Injection

Methotrexate is a cytotoxic product which is usually used as a cancer chemotherapeutic

agent. In long term care facilities, it is occasionally used to treat advanced rheumatoid arthritis.

Methotrexate injection requires special handling. Nurses should always be **double-gloved** when preparing and administering the product. Before methotrexate is withdrawn from a vial, a volume of air equal to the volume of methotrexate to be removed must be injected into the vial. The dose should be drawn into the syringe slowly. Any bubbles must be removed from the syringe while it is still in the methotrexate vial. **Do not purge** the syringe after it has been removed from the methotrexate vial.

The syringe and needle should be disposed of in the sharps container immediately after injection. The needle should not be recapped. If ampoules are being used, they should be discarded in a similar manner. The hands should be washed with soap and water after administration is complete.

Tubal Aggravation

Are you tired of plunging Coke and Cotazyme® into your residents’ G-tubes in an effort to clear them out. Perhaps you are spending valuable minutes dissolving away the coating of your favourite PPI (e.g. Losec,

Prevacid, Pantoloc, Pariet) with sodium bicarbonate, or pounding away at these drugs until they are pulverized to a fine powder in an effort to get them through the tube.

If you would rather spend more time nursing, and less time plumbing, consider bringing Prevacid FasTabs into your facility. This PPI disintegrates into small granules the moment water is added to it, and passes easily through feeding tubes. Speak to your physicians about selecting this product for any of your tube-fed residents who are currently using a PPI. Prevacid FasTabs can be covered after an application is made to the Section 8 Program of ODB.

Hemoglobin and CKD

Erythropoetic hormone-like medications, such as Eprex® and Aranesp®, are often used to treat severe anemias related to Chronic Kidney disease (CKD), and cancer chemotherapy. These expensive medications do a wonderful job of increasing depressed hemoglobin levels.

It is imperative that these products be withheld when the hemoglobin level reaches 120 G/l. The risk of stroke, and other thrombotic events, increases significantly above this level.

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